



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Inventor: LYLE et al. Examiner: Matthew E. Heneghan
Application No.: 09/615,967 Art Unit: 2134
Filed: July 14, 2000 Docket No. RECOP001
Title: SYSTEM AND METHOD FOR COMPUTER SECURITY

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in a prepaid envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on:

8. 3, 2004.

Vicki Lorist

Vicki Lorist

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

RECEIVED

AUG 11 2004

Technology Center 2100

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated as shown below.

| | Claims remaining after Amendment | Highest previously paid for | Present Extra | Small Entity | | Large Entity | |
|--------------|---|-----------------------------|---------------|--------------|--------------------|--------------------|----------------|
| | | | | Rate | Additional Fee | Rate | Additional Fee |
| Total Claims | 21 | Less | 32 | 0 | x \$9 = \$ | OR | x \$18 = \$ 0 |
| Indep Claims | 03 | Less | 05 | 0 | x \$43 = \$ | OR | x \$86 = \$ 0 |
| | []Multiple Dependent claim Present & Fee Not previously paid | | | | x \$145 = \$ | OR | x \$290 = \$ |
| | | | | | TOTAL ADD'L FEE \$ | TOTAL ADD'L FEE \$ | 0 |



Applicant(s) hereby petition for a **TWO** month(s) extension of time to respond to the outstanding Office Action.



Applicant(s) believe that no (additional) Extension of Time is required; however, if it is determined that such an extension is required, Applicant(s) hereby petition that such an extension be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No. 50-0685. ().

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- Enclosed is our Check No. 1369 in the amount of \$420 to cover the additional claim fee and/or extension of time fees.
- Enclosed is Applicant Initiated Interview Request Form, PTOL-413A.
- Enclosed are 15 sheets formal drawings.
- Please charge Deposit Account No. 50-0685 () in the amount of \$ to cover the additional claim fee and/or extension of time fees.
- If the required fees are missing or any additional fees are required during the pendency of the subject application, please charge such fees or credit any overpayment to Deposit Account No. 50-0685 (RECOP001).

Respectfully submitted,
VAN PELT & YI LLP

Clover Huang
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Registration No. 55,285

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